## CITY OF EL PASO, TEXAS DEPARTMENT HEAD'S SUMMARY REQUEST FOR COUNCIL ACTION (RCA)

**DEPARTMENT:** 

Museum

AGENDA DATE: 06/21/05
CONTACT PERSON/PHONE: Museum, Amy Reed, (915) 532-1707
DISTRICT(S) AFFECTED: N/A
SUBJECT:
APPROVE: Staffing Table Change Request for Art Museum Registrar
BACKGROUND / DISCUSSION:
This position was approved for reclassification to reflect the level of responsibility inherent in the job specification
PRIOR COUNCIL ACTION:
<u>N/A</u>
AMOUNT AND SOURCE OF FUNDING:
Already budgeted for FY/05. Fund Source: 54010331-01101-54000
BOARD / COMMISSION ACTION: Enter appropriate comments or N/A
As per Civil Service Commission on 06/21/05
**************************************
<u>LEGAL:</u> (if required)
OTHER:  (Example: if RCA is initiated by Purchasing, client department should sign also)  Information copy to appropriate Deputy City Manager
APPROVED FOR AGENDA:
CITY MANAGER: DATE:

DATE:\_06/10/05

## CITY OF EL PASO STAFFING TABLE CHANGE REQUEST

Date sent to City Council:	0	21	05
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INITI		2005-89									Date sent to Human R	esources. (a	1211	05
DEPARTMENT NAME: Museum (1) F					(1) HR DEPART 54	TMENT ID	(2) ATTACHED DOCUMENTATION ☐ Description of Duties ☐ Organization Chart			REQUESTED EFFECTIVE DATE: 06/21/05				
A=add							L Olgan	ization Chart						
D=delete (3) (4) (5)						GOLD III GOD	ACTIONS	(7)		*	*R/T/C -Position Type *L/U =	Regular, Temp Classified, Uncla	oorary, C assified	ontract.
A/D	# OF POS	Max Head Count	Business Unit	ACCOUNT DESCRIPTION and ACCOUNT CODE Fin. Dept. ID-Fund-Fin. Loc. Proj. or Grnt. (000000000-00000-00000PorG0000)				osition Number(s)	JOB CODE	,	JOB CLASS TITLE	PLAN GRADE	R/T/C	L/U
A	1	11	COFEP	54010331-01101-54000					5117	Art Museum	Registrar	- PM - 73	R	L
D	1	1	COFEP	54010331-01101-540	00				9351	Art Museum	Registrar	PM		<b></b>
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(8) Purp	nose:	Streamline	☐ Expand	ad Dragger	<u> </u>									
		JT OF NEED	/ CONSECT	ed Program New	Program New I	Facility 🛛 (	Other (Explai	n)					·	
inhere	ent in the	job classific	ation	DENCES OF NOT APPI	ROVING ACTION(S	): Per CSC a	action of 06	09/05 wherein the	position wa	s approved fo	or reclassification to reflec	t the level of resp	ponsibili	ty
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(10) D	EPARTM	ENT ORGAN	IIZATION/C	PERATIONS	1	ANII		MPACT ON: (11) DEPARTMENT	T DUD CD#					
								(11) DEPARTMEN	BUDGET	<del></del>				
(10) 5	ED I DEL								<del></del>					
(12) b	EPARTM	ENT HEAD S	SIGNATURE		DATE: / 10/05	BUDGET (	CHANGE ed ☐ Atta	ched			AMOUNT ADDITIONAL FO	JNDS		
	0					RESOURCE	S DEPART	MENT RECOMME	NDATION					
<ul> <li>☐ Requested CC and CG is Appropriate</li> <li>☐ Change Class To</li> <li>☐ Change Grade To</li> </ul>					СОММЕ	HUMAN RESOURCES DEPARTMENT RECOMMENDATION  COMMENTS  HUMAN RESOURCES DIRECTOR  DATE							100	
COMN	MENTS:				O.M.B R	ECOMMENI	DATION / C	ITY MANAGER A	PPROVAL		Any to		0/12	100
										<del>-</del>				
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F-STCD #	ot 10/29/	2004						7,	Α	PPROVED:				
JI CIC.	OL 10/29/	2004							-					